

INTERDISTRICT PUBLIC SCHOOL CHOICE
NOTICE OF REJECTION
TO PARENT/LEGAL GUARDIAN OF STUDENT APPLICANT
(SAMPLE)

TO: (Name of Parent/Legal Guardian)
 (Address)

FROM: (Name), Superintendent
 (Name of Choice District)

DATE: *[first cycle: January 6, 2004] [second cycle: May 5, 2004]*

We are sorry to inform you that (Name of student applicant) has not been accepted as a choice program student in (Name of choice district) in (Name of school) in grade (enter grade) for September 2004.

The (Name of choice district) received more applications than there were seats available in (enter grade level) grade for the 2004-2005 school year and it was necessary for us to hold a lottery to select students for admission. Unfortunately, (Name of student applicant) was not selected. However, the student has been placed on our waiting list and assigned number (enter number.) Should a place become available, we will contact you to see if you are still interested,

We wish every success to (Name of student applicant) in the 2004-2005 school year and hope that you will consider applying to the (Name of choice district) for admission to the choice program in the future.

Due to parent or legal guardian of student by [first cycle: January 6, 2004] [second cycle: May 5, 2004]